

| POSITION | INITIALS | ID NO. |
|---------------------|----------|---------------|
| FEES DETERMINATION | TCD | 479182 |
| O.I.P.E. CLASSIFIER | EPD | 67555 |
| FORMALITY REVIEW | | 08900 7/29/99 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | |
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If more than 150 claims or 10 actions
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| POSITION | ID NO. | DATE |
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| CLASSIFIER | | |
| EXAMINER | 45 | 9-31-92 |
| TYPIST | 21 | 9/22 |
| VERIFIER | 21 | 9/22 |
| CORPS CORR. | | |
| SPEC. HAND | | |
| FILE MAINT. | | |
| DRAFTING | | |

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SYMBOLS

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|---|---------------------------|
| ✓ | Rejected |
| = | Allowed |
| - | (Through number) Canceled |
| + | Restricted |
| N | Non-elected |
| I | Interference |
| A | Appeal |
| O | Objected |

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